

**UNITED STATES BANKRUPTCY COURT  
DISTRICT OF NEW JERSEY**

In re ROSA MARIA STYLES

Case No. 19-32881 ABA  
Reporting Period **NOVEMBER 2020**

**MONTHLY OPERATING REPORT**

File with Court and submit copy to United States Trustee within 20 days after end of month.

Submit copy of report to any official committee appointed in the case.

<b>REQUIRED DOCUMENTS</b>	<b>Form No.</b>	<b>Document Attached</b>	<b>Explanation Attached</b>	<b>Affidavit/Supplement Attached</b>
Schedule of Cash Receipts and Disbursements	MOR-1	x		
Bank Reconciliation (or copies of debtor's bank reconciliations)	MOR-1a	x		
Schedule of Professional Fees Paid	MOR-1b	x		
Copies of bank statements		x		
Cash disbursements journals		x		
Statement of Operations	MOR-2	x		
Balance Sheet	MOR-3	x		
Status of Postpetition Taxes	MOR-4	x		
Copies of IRS Form 6123 or payment receipt				
Copies of tax returns filed during reporting period				
Summary of Unpaid Postpetition Debts	MOR-4			
Listing of aged accounts payable	MOR-4	x		
Accounts Receivable Reconciliation and Aging	MOR-5	x		
Debtor Questionnaire	MOR-5	x		

I declare under penalty of perjury (28 U.S.C. Section 1746) that this report and the attached documents are true and correct to the best of my knowledge and belief.

/s/ Rosa Maria Styles  
Signature of Debtor

January 7, 2021  
Date

\_\_\_\_\_  
Signature of Joint Debtor

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Authorized Individual\*

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name of Authorized Individual

\_\_\_\_\_  
Title of Authorized Individual

\*Authorized individual must be an officer, director or shareholder if debtor is a corporation; a partner if debtor is a partnership; a manager or member if debtor is a limited liability company.

In re ROSA MARIA STYLES  
Debtor

Case No. 19-32881 ABA  
Reporting Period: **NOVEMBER 2020**

### SCHEDULE OF CASH RECEIPTS AND DISBURSEMENTS

Amounts reported should be per the debtor's books, not the bank statement. The beginning cash should be the ending cash from the prior month or, if this is the first report, the amount should be the balance on the date the petition was filed. The amounts reported in the "CURRENT MONTH - ACTUAL" column must equal the sum of the four bank account columns. The amounts reported in the "PROJECTED" columns should be taken from the SMALL BUSINESS INITIAL REPORT (FORM IR-1). Attach copies of the bank statements and the cash disbursements journal. The total disbursements listed in the disbursements journal must equal the total disbursements reported on this page. A bank reconciliation must be attached for each account. [See MOR-1 (CONT)]

	BANK ACCOUNTS				CURRENT MONTH		CUMULATIVE FILING TO DATE	
	OPER.	PAYROLL	TAX	OTHER	ACTUAL	PROJECTED	ACTUAL	PROJECTED
<b>CASH BEGINNING OF MONTH</b>								
<b>RECEIPTS</b>								
CASH SALES								
ACCOUNTS RECEIVABLE								
LOANS AND ADVANCES								
SALE OF ASSETS	PLEASE SEE ATTACHED QUICKBOOKS REGISTER AND BANK STATEMENTS							
OTHER (ATTACH LIST)								
TRANSFERS (FROM DIP ACCTS)								
<b>TOTAL RECEIPTS</b>								
<b>DISBURSEMENTS</b>								
NET PAYROLL								
PAYROLL TAXES								
SALES, USE, & OTHER TAXES								
INVENTORY PURCHASES								
SECURED/ RENTAL/ LEASES								
INSURANCE								
ADMINISTRATIVE								
SELLING								
OTHER (ATTACH LIST)								
OWNER DRAW *								
TRANSFERS (TO DIP ACCTS)								
PROFESSIONAL FEES								
U.S. TRUSTEE QUARTERLY FEES								
COURT COSTS								
<b>TOTAL DISBURSEMENTS</b>								
<b>NET CASH FLOW</b>								
(RECEIPTS LESS DISBURSEMENTS)								
<b>CASH - END OF MONTH</b>								

\* COMPENSATION TO SOLE PROPRIETORS FOR SERVICES RENDERED TO BANKRUPTCY ESTATE

#### THE FOLLOWING SECTION MUST BE COMPLETED

DISBURSEMENTS FOR CALCULATING U.S. TRUSTEE QUARTERLY FEES: (FROM CURRENT MONTH ACTUAL COLUMN)	
TOTAL DISBURSEMENTS	\$ 5,071.57
LESS: TRANSFERS TO DEBTOR IN POSSESSION ACCOUNTS	\$ -
PLUS: ESTATE DISBURSEMENTS MADE BY OUTSIDE SOURCES (i.e. from escrow accounts)	\$ -
<b>TOTAL DISBURSEMENTS FOR CALCULATING U.S. TRUSTEE QUARTERLY FEES</b>	<b>\$ 5,071.57</b>





In re ROSA MARIA STYLESA1:G45

Debtor

Case No. 19-32881 ABA

Reporting Period: NOVEMBER 2020

### STATUS OF POSTPETITION TAXES

#### ADDRESSED IN DISCLOSURE STATEMENT AND PLAN

The beginning tax liability should be the ending liability from the prior month or, if this is the first report, the amount should be zero.

Attach photocopies of IRS Form 6123 or payment receipt to verify payment or deposit of federal payroll taxes.

Attach photocopies of any tax returns filed during the reporting period.

Federal and State Income Tax withheld from salary						Ending Tax Liability
	Beginning Tax Liability	Amount Withheld or Accrued	Amount Paid	Date Paid	Check No. or EFT	
Federal						
Withholding						\$ -
FICA-Employee						\$ -
FICA-Employer						\$ -
Unemployment						\$ -
Income: addressed in the Plan Projections	\$ -					\$ -
Other:						\$ -
Total Federal Taxes	\$ -					\$ -
State and Local						
Withholding						\$ -
Sales						\$ -
Excise						\$ -
Unemployment						\$ -
Real Property	Addressed in the Filed Disclosure Statement and Plan (DS&P)					
Personal Property						\$ -
Other:						\$ -
Total State and Local	Addressed in the Filed Disclosure Statement and Plan (DS&P)					
Total Taxes	Addressed in the Filed Disclosure Statement and Plan (DS&P)					

### SUMMARY OF UNPAID POSTPETITION DEBTS

#### ADDRESSED IN DISCLOSURE STATEMENT AND PLAN

Attach aged listing of accounts payable.

	Number of Days Past Due					Total
	Current	0-30	31-60	61-90	Over 90	
Accounts Payable						\$ -
Wages Payable						\$ -
Taxes Payable - Income Addressed in DS&P	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Rent/Leases-Building						\$ -
Rent/Leases-Equipment						\$ -
Secured Debt/Adequate Protection Payments	ORDER GRANTNG REINSTATEMENT OF AVALON PROPERTY					
Professional Fees	ON 10-8-2020. CREDITOR FOREBARANCE FOR 61 SEW					\$ -
Amounts Due to Insiders*						\$ -
<b>Total Postpetition Debts</b>	\$ -	Property FMV exceeds undisputed Secured Debt				

Explain how and when the Debtor intends to pay any past-due postpetition debts.

\*"Insider" is defined in 11 U.S.C. Section 101(31).

In Re: ROSA MARIA STYLES  
Case No. 19-32881 ABA  
Reporting Period: NOVEMBER 2020

### ACCOUNTS RECEIVABLE RECONCILIATION AND AGING

Accounts Receivable Reconciliation		Amount
Total Accounts Receivable at the beginning of the reporting period	\$	-
+ Amounts billed during the period		-
- Amounts collected during the period		-
Total Accounts Receivable at the end of the reporting period	\$	-
Accounts Receivable Aging		Amount
0 - 30 days old	\$	-
31 - 60 days old		-
61 - 90 days old		-
91+ days old		-
Total Accounts Receivable		-
Amount considered uncollectible (Bad Debt)		-
Accounts Receivable (net)	\$	-

### DEBTOR QUESTIONNAIRE

Must be completed each month	Yes	No
1. Have any assets been sold or transferred outside the normal course of business this reporting period? If yes, provide an explanation below.		X
2. Have any funds been disbursed from any account other than a debtor in possession account this reporting period? If yes, provide an explanation below.		X
3. Have all postpetition tax returns been timely filed? If no, provide an explanation below.	X	
4. Are workers compensation, general liability and other necessary insurance coverages in effect? If no, provide an explanation below.	X	
5. Has any bank account been opened during the reporting period? If yes, provide documentation identifying the opened account(s). If an investment account has been opened provide the required documentation pursuant to the Delaware Local Rule 4001-3.		X

**ROSA MARIA STYLES 19-32881 ABA**

**Profit & Loss**

**December 9, 2019 through December 5, 2020**

	Dec 9, '19 - Dec 5, 20
<b>Income</b>	
Bank Balance at 12-8-2019	2,952.23
interest income	0.19
Retirement Income	25,495.41
Return bank fees	0.20
Spousal Contribution	19,299.00
<b>Total Income</b>	<b>47,747.03</b>
<b>Expense</b>	
AUTO	240.00
Bank Charges	1.20
Cable, TV, Telephone	162.96
cash	2,660.00
Clothing	4,010.82
Equipment	1,188.26
Food and housekeeping supplies	7,039.78
Health Insurance	1,321.39
Maintenance, repair	1,674.03
Medical	1,906.26
Personal	21,040.77
Personal care products and serv	3,046.10
service charges- checks,etc	43.00
Tax Ref	-1,200.00
Transportation	387.00
<b>Total Expense</b>	<b>43,521.57</b>
<b>Net Income</b>	<b>4,225.46</b>

**ROSA MARIA STYLES 19-32881 ABA**

**Profit & Loss**

**November 6 through December 5, 2020**

	Nov 6 - Dec 5, 20
<b>Income</b>	
Retirement Income	2,040.10
Spousal Contribution	2,000.00
<b>Total Income</b>	<b>4,040.10</b>
<b>Expense</b>	
AUTO	75.00
cash	860.00
Clothing	225.88
Food and housekeeping supplies	366.12
Health Insurance	134.61
Medical	214.01
Personal	3,049.95
Personal care products and serv	146.00
<b>Total Expense</b>	<b>5,071.57</b>
<b>Net Income</b>	<b>-1,031.47</b>

**ROSA MARIA STYLES 19-32881 ABA**

**Balance Sheet**

As of December 5, 2020

	Dec 5, 20
<b>ASSETS</b>	
Current Assets	
Checking/Savings	
TD BANK 32881	4,225.46
Total Checking/Savings	4,225.46
Total Current Assets	4,225.46
<b>TOTAL ASSETS</b>	<b>4,225.46</b>
<b>LIABILITIES &amp; EQUITY</b>	
Equity	
Net Income	4,225.46
Total Equity	4,225.46
<b>TOTAL LIABILITIES &amp; EQUITY</b>	<b>4,225.46</b>

**ROSA MARIA STYLES 19-32881 ABA**

**Deposit Detail**

**November 6 through December 5, 2020**

Type	Num	Date	Name	Account	Amount
Deposit	DEP	11/12/2020	SPOUSE	TD BANK 32881	2,000.00
				Spousal Contribution	-2,000.00
TOTAL					-2,000.00
Deposit	DEP	11/25/2020	SOCIAL SECURITY	TD BANK 32881	1,239.00
				Retirement Income	-1,239.00
TOTAL					-1,239.00
Deposit	DEP	12/01/2020	OWENS-ILLINOIS S...	TD BANK 32881	801.10
				Retirement Income	-801.10
TOTAL					-801.10

**ROSA MARIA STYLES 19-32881 ABA**  
**Check Detail**

November 6 through December 5, 2020

Type	Num	Date	Name	Item	Account	Paid Amount	Original Amount
Check	DEB	11/12/2020	AETNA		TD BANK 32881		-134.61
TOTAL					Health Insurance	-134.61	134.61
						-134.61	134.61
Check	DEB	11/12/2020	NJ EXPASS		TD BANK 32881		-25.00
TOTAL					AUTO	-25.00	25.00
						-25.00	25.00
Check	DEB	11/12/2020	CVS		TD BANK 32881		-5.33
TOTAL					Medical	-5.33	5.33
						-5.33	5.33
Check	DEB	11/13/2020	CVS		TD BANK 32881		-26.98
TOTAL					Medical	-26.98	26.98
						-26.98	26.98
Check	DEB	11/16/2020	ACME		TD BANK 32881		-80.09
TOTAL					Food and housekeepi...	-80.09	80.09
						-80.09	80.09
Check	DEB	11/17/2020	THE PREPPY PALM		TD BANK 32881		-111.00
TOTAL					Personal care produc...	-111.00	111.00
						-111.00	111.00
Check	DEB	11/17/2020	ACME		TD BANK 32881		-36.24
TOTAL					Food and housekeepi...	-36.24	36.24
						-36.24	36.24

**ROSA MARIA STYLES 19-32881 ABA**  
**Check Detail**  
 November 6 through December 5, 2020

Type	Num	Date	Name	Item	Account	Paid Amount	Original Amount
Check	DEB	11/17/2020	ATM		TD BANK 32881		-1,700.00
TOTAL					Personal	-1,700.00	1,700.00
Check	DEB	11/18/2020	CVS		TD BANK 32881		-141.13
TOTAL					Medical	-141.13	141.13
Check	DEB	11/19/2020	WALMART		TD BANK 32881		-260.65
TOTAL					Personal	-260.65	260.65
Check	DEB	11/20/2020	SHOPRITE		TD BANK 32881		-141.66
TOTAL					Food and housekeepi...	-141.66	141.66
Check	DEB	11/20/2020	NJ EXPRESS		TD BANK 32881		-25.00
TOTAL					AUTO	-25.00	25.00
Check	DEB	11/23/2020	SHOPRITE		TD BANK 32881		-42.07
TOTAL					Food and housekeepi...	-42.07	42.07
Check	DEB	11/24/2020	TARGET		TD BANK 32881		-13.85
TOTAL					Clothing	-13.85	13.85

**ROSA MARIA STYLES 19-32881 ABA**  
**Check Detail**

November 6 through December 5, 2020

Type	Num	Date	Name	Item	Account	Paid Amount	Original Amount
Check	DEB	11/25/2020	NJ EXPRESS		TD BANK 32881		-25.00
TOTAL					AUTO	-25.00	25.00
						-25.00	25.00
Check	DEB	11/30/2020	TJ MAXX		TD BANK 32881		-117.21
TOTAL					Clothing	-117.21	117.21
						-117.21	117.21
Check	DEB	12/01/2020	SP PEPPERS		TD BANK 32881		-35.00
TOTAL					Personal care produc...	-35.00	35.00
						-35.00	35.00
Check	DEB	12/02/2020	VENMO		TD BANK 32881		-860.00
TOTAL					cash	-860.00	860.00
						-860.00	860.00
Check	DEB	12/02/2020	WALMART		TD BANK 32881		-197.84
TOTAL					Personal	-197.84	197.84
						-197.84	197.84
Check	DEB	12/02/2020	MARSHALLS		TD BANK 32881		-94.82
TOTAL					Clothing	-94.82	94.82
						-94.82	94.82
Check	DEB	12/03/2020	HOMEGOODS		TD BANK 32881		-91.46
TOTAL					Personal	-91.46	91.46
						-91.46	91.46

**ROSA MARIA STYLES 19-32881 ABA**  
**Check Detail**  
 November 6 through December 5, 2020

Type	Num	Date	Name	Item	Account	Paid Amount	Original Amount
Check	DEB	12/03/2020	ACME		TD BANK 32881		-66.06
					Food and housekeepi...	-66.06	66.06
TOTAL						-66.06	66.06
Check	DEB	12/04/2020	WALGREENS		TD BANK 32881		-40.57
					Medical	-40.57	40.57
TOTAL						-40.57	40.57
Check	99	11/13/2020	CASH		TD BANK 32881		-800.00
					Personal	-800.00	800.00
TOTAL						-800.00	800.00



**Bank**

America's Most Convenient Bank®

T STATEMENT OF ACCOUNT

AV 01 070394 41938B214 A\*\*5DGT

ROSA M STYLES  
DIP CASE 19-32881 DIST NJ  
61 HARTFORD RD  
SEWELL NJ 08080-2040

Page: 1 of 4  
Statement Period: Nov 06 2020-Dec 05 2020  
Cust Ref #: 4373726202-039-T-###  
Primary Account #: 437-3726202



## Chapter 11 Checking

ROSA M STYLES  
DIP CASE 19-32881 DIST NJ

Account # 437-3726202

### ACCOUNT SUMMARY

Beginning Balance	5,256.93	Average Collected Balance	4,899.84
Deposits	2,000.00	Interest Earned This Period	0.00
Electronic Deposits	2,040.10	Interest Paid Year-to-Date	0.02
		Annual Percentage Yield Earned	0.00%
Checks Paid	800.00	Days in Period	30
Electronic Payments	2,571.57		
Other Withdrawals	1,700.00		
Ending Balance	4,225.46		

### DAILY ACCOUNT ACTIVITY

#### Deposits

POSTING DATE	DESCRIPTION	AMOUNT
11/12	DEPOSIT	2,000.00
	<b>Subtotal:</b>	<b>2,000.00</b>

#### Electronic Deposits

POSTING DATE	DESCRIPTION	AMOUNT
11/25	ACH DEPOSIT, SSA TREAS 310 XXSOC SEC ****09922A SSA	1,239.00
12/01	ACH DEPOSIT, OWENS-ILLINOIS S JHTC 5788646	801.10
	<b>Subtotal:</b>	<b>2,040.10</b>

#### Checks Paid

No. Checks: 1

\*Indicates break in serial sequence or check processed electronically and listed under Electronic Payments

DATE	SERIAL NO.	AMOUNT
11/13	99	800.00
	<b>Subtotal:</b>	<b>800.00</b>

#### Electronic Payments

POSTING DATE	DESCRIPTION	AMOUNT
11/12	ACH DEBIT, AETNA HEALTH INS INS PYMT AHC6236740	134.61
11/12	DEBIT CARD PURCHASE, *****30071395297, AUT 111020 VISA DDA PUR NJ EZPASS 888 288 6865 * NJ	25.00
11/12	DEBIT CARD PAYMENT, *****30071395297, AUT 110920 VISA DDA PUR WWW CVS COM 888 607 4287 * IN	5.33
11/13	DEBIT CARD PURCHASE, *****30071395297, AUT 111220 VISA DDA PUR CVS PHARMACY 00429 CAPE MAY COUR * NJ	26.98
11/16	DEBIT POS, *****30071395297, AUT 111520 DDA PURCHASE ACME 0859 CAPE MAY COUR * NJ	80.09
11/17	DEBIT CARD PURCHASE, *****30071395297, AUT 111520 VISA DDA PUR THE PREPPY PALM AVALON * NJ	111.00

Call 1-800-937-2000 for 24-hour Bank-by-Phone services or connect to [www.tdbank.com](http://www.tdbank.com)

# How to Balance your Account

Page: 2 of 4

**Begin by adjusting your account register as follows:**

- Subtract any services charges shown on this statement.
- Subtract any automatic payments, transfers or other electronic withdrawals not previously recorded.
- Add any interest earned if you have an interest-bearing account.
- Add any automatic deposit or overdraft line of credit.
- Review all withdrawals shown on this statement and check them off in your account register.
- Follow instructions 2-5 to verify your ending account balance.

1. Your ending balance shown on this statement is:
2. List below the amount of deposits or credit transfers which do not appear on this statement. Total the deposits and enter on Line 2.
3. Subtotal by adding lines 1 and 2.
4. List below the total amount of withdrawals that do not appear on this statement. Total the withdrawals and enter on Line 4.
5. Subtract Line 4 from 3. This adjusted balance should equal your account balance.

①	Ending Balance		4,225.46
②	Total Deposits	+	
③	Sub Total		
④	Total Withdrawals	-	
⑤	Adjusted Balance		

DEPOSITS NOT ON STATEMENT	DOLLARS	CENTS
Total Deposits		

WITHDRAWALS NOT ON STATEMENT	DOLLARS	CENTS

WITHDRAWALS NOT ON STATEMENT	DOLLARS	CENTS
Total Withdrawals		

## FOR CONSUMER ACCOUNTS ONLY — IN CASE OF ERRORS OR QUESTIONS ABOUT YOUR ELECTRONIC FUNDS TRANSFERS:

If you need information about an electronic fund transfer or if you believe there is an error on your bank statement or receipt relating to an electronic fund transfer, telephone the bank immediately at the phone number listed on the front of your statement or write to:

**TD Bank, N.A., Deposit Operations Dept, P.O. Box 1377, Lewiston, Maine 04243-1377**

We must hear from you no later than sixty (60) calendar days after we sent you the first statement upon which the error or problem first appeared. When contacting the Bank, please explain as clearly as you can why you believe there is an error or why more information is needed. Please include:

- Your name and account number.
- A description of the error or transaction you are unsure about.
- The dollar amount and date of the suspected error.

When making a verbal inquiry, the Bank may ask that you send us your complaint in writing within ten (10) business days after the first telephone call.

We will investigate your complaint and will correct any error promptly. If we take more than ten (10) business days to do this, we will credit your account for the amount you think is in error, so that you have the use of the money during the time it takes to complete our investigation.

## INTEREST NOTICE

Total interest credited by the Bank to you this year will be reported by the Bank to the Internal Revenue Service and State tax authorities. The amount to be reported will be reported separately to you by the Bank.

## FOR CONSUMER LOAN ACCOUNTS ONLY — BILLING RIGHTS SUMMARY

### In case of Errors or Questions About Your Bill:

If you think your bill is wrong, or if you need more information about a transaction on your bill, write us at P.O. Box 1377, Lewiston, Maine 04243-1377 as soon as possible. We must hear from you no later than sixty (60) days after we sent you the FIRST bill on which the error or problem appeared. You can telephone us, but doing so will not preserve your rights. In your letter, give us the following information:

- Your name and account number.
- The dollar amount of the suspected error.
- Describe the error and explain, if you can, why you believe there is an error. If you need more information, describe the item you are unsure about.

You do not have to pay any amount in question while we are investigating, but you are still obligated to pay the parts of your bill that are not in question. While we investigate your question, we cannot report you as delinquent or take any action to collect the amount you question.

**FINANCE CHARGES:** Although the Bank uses the Daily Balance method to calculate the finance charge on your Moneyline/Overdraft Protection account (the term "ODP" or "OD" refers to Overdraft Protection), the Bank discloses the Average Daily Balance on the periodic statement as an easier method for you to calculate the finance charge. The finance charge begins to accrue on the date advances and other debits are posted to your account and will continue until the balance has been paid in full. To compute the finance charge, multiply the Average Daily Balance times the Days in Period times the Daily Periodic Rate (as listed in the Account Summary section on the front of the statement). The Average Daily Balance is calculated by adding the balance for each day of the billing cycle, then dividing the total balance by the number of Days in the Billing Cycle. The daily balance is the balance for the day after advances have been added and payments or credits have been subtracted plus or minus any other adjustments that might have occurred that day. There is no grace period during which no finance charge accrues. Finance charge adjustments are included in your total finance charge.



**Bank**

America's Most Convenient Bank®

STATEMENT OF ACCOUNT

ROSA M STYLES  
DIP CASE 19-32881 DIST NJ

Page: 3 of 4  
Statement Period: Nov 06 2020-Dec 05 2020  
Cust Ref #: 4373726202-039-T-###  
Primary Account #: 437-3726202

DAILY ACCOUNT ACTIVITY

**Electronic Payments (continued)**

POSTING DATE	DESCRIPTION	AMOUNT
11/17	DEBIT POS, *****30071395297, AUT 111720 DDA PURCHASE ACME 0890 CAPE MAY COUR * NJ	36.24
11/18	DEBIT CARD PURCHASE, *****30071395297, AUT 111720 VISA DDA PUR CVS PHARMACY 00429 CAPE MAY COUR * NJ	141.13
11/19	DEBIT POS, *****30071395297, AUT 111920 DDA PURCHASE WAL MART 1742 TURNERSVILLE * NJ	260.65
11/20	DEBIT POS, *****30071395297, AUT 112020 DDA PURCHASE SHOPRITE WSHNGTNTWP S1 SEWELL * NJ	141.66
11/20	DEBIT CARD PURCHASE, *****30071395297, AUT 111920 VISA DDA PUR NJ EZPASS 888 288 6865 * NJ	25.00
11/23	DEBIT POS, *****30071395297, AUT 112320 DDA PURCHASE SHOPRITE WSHNGTNTWP S1 SEWELL * NJ	42.07
11/24	DEBIT CARD PURCHASE, *****30071395297, AUT 112320 VISA DDA PUR TARGET 00011320 TURNERSVILLE * NJ	13.85
11/25	DEBIT CARD PURCHASE, *****30071395297, AUT 112420 VISA DDA PUR NJ EZPASS 888 288 6865 * NJ	25.00
11/30	DEBIT POS, *****30071395297, AUT 112920 DDA PURCHASE T J MAXX 20 COURT HOU CAPE MAY CH * NJ	117.21
12/01	DEBIT CARD PURCHASE, *****30071395297, AUT 113020 VISA DDA PUR SP PEEPERS STRIPE COM * IN	35.00
12/02	ELECTRONIC PMT-WEB, VENMO PAYMENT ****778959	860.00
12/02	DEBIT POS, *****30071395297, AUT 120220 DDA PURCHASE WAL MART SUPER CENTER TURNERSVILLE * NJ	197.84
12/02	DEBIT POS, *****30071395297, AUT 120220 DDA PURCHASE MARSHALLS 3501 ROUTE 4 TURNERSVILLE * NJ	94.82
12/03	DEBIT POS, *****30071395297, AUT 120320 DDA PURCHASE HOMEGOODS 1341B FAIRVI DELRAN * NJ	91.46
12/03	DEBIT POS, *****30071395297, AUT 120320 DDA PURCHASE ACME 3994 SEWELL * NJ	66.06
12/04	DEBIT CARD PURCHASE, *****30071395297, AUT 120320 VISA DDA PUR WALGREENS 10324 SEWELL * NJ	40.57
Subtotal:		2,571.57

**Other Withdrawals**

POSTING DATE	DESCRIPTION	AMOUNT
11/17	DEBIT	1,700.00
Subtotal:		1,700.00



**Bank**

America's Most Convenient Bank®

STATEMENT OF ACCOUNT

ROSA M STYLES  
DIP CASE 19-32881 DIST NJ

Page: 4 of 4  
Statement Period: Nov 06 2020-Dec 05 2020  
Cust Ref #: 4373726202-039-T-###  
Primary Account #: 437-3726202

DAILY BALANCE SUMMARY

DATE	BALANCE	DATE	BALANCE
11/05	5,256.93	11/23	3,727.17
11/12	7,091.99	11/24	3,713.32
11/13	6,265.01	11/25	4,927.32
11/16	6,184.92	11/30	4,810.11
11/17	4,337.68	12/01	5,576.21
11/18	4,196.55	12/02	4,423.55
11/19	3,935.90	12/03	4,266.03
11/20	3,769.24	12/04	4,225.46